County

No

Skilled

13197 CHURCH STREET, PO BOX 310
PIGEON FALLS 54760 Phone:(715) 983-2293 Ownership:
Operated from 1/1 To 12/31 Days of Operation: 365 Highest Level License:
Operate in Conjunction with Hospital? No Operate in Conjunction with CBRF?
Number of Beds Set Up and Staffed (12/31/05): 37 Title 18 (Medicare) Certified?

PIGEON FALLS HEALTH CARE CENTER

Number of Beds Set Up and Staffed (12/31/05): 37 Title 18 (Medicare) Certified? No Total Licensed Bed Capacity (12/31/05): 37 Title 19 (Medicaid) Certified? Yes Number of Residents on 12/31/05: 36 Average Daily Census: 36

Age, Gender, and Primary Diagnosis	of Residents (12/3	31/05)		Length of Stay (12/31/05)	%		
Primary Diagnosis	Age Groups	8	Less Than 1 Year 1 - 4 Years				
Developmental Disabilities	0.0	Under 65	5.6	More Than 4 Years	13.9		
Mental Illness (Org./Psy)	38.9	65 - 74	11.1				
Mental Illness (Other)	13.9	75 - 84	27.8		100.0		
Alcohol & Other Drug Abuse	0.0	85 - 94	44.4				
Para-, Quadra-, Hemiplegic	0.0	95 & Over	11.1	Full-Time Equivalent			
Cancer	0.0			Nursing Staff per 100 Resid	lents		
Fractures	0.0		100.0	(12/31/05)			
Cardiovascular	0.0	65 & Over	94.4				
Cerebrovascular	11.1			RNs	9.2		
Diabetes	0.0	Gender	8	LPNs	14.6		
Respiratory	0.0			Nursing Assistants,			
Other Medical Conditions	36.1	Male	44.4	Aides, & Orderlies	48.2		
		Female	55.6	İ			
	100.0			j			
			100.0	İ			

Method of Reimbursement

		edicare itle 18			edicaid itle 19			Other]	Private Pay	<u> </u>		amily Care			anaged Care	l		
Level of Care	No.	%	Per Diem (\$)	No.	ુ જ	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	- Of
Int. Skilled Care	0	0.0	0	2	7.1	156	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	2	5.6
Skilled Care	0	0.0	0	24	85.7	132	0	0.0	0	7	87.5	136	0	0.0	0	0	0.0	0	31	86.1
Intermediate				2	7.1	109	0	0.0	0	1	12.5	112	0	0.0	0	0	0.0	0	3	8.3
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depende	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	0	0.0		28	100.0		0	0.0		8	100.0		0	0.0		0	0.0		36	100.0

PIGEON FALLS HEALTH CARE CENTER

Admissions, Discharges, and		Percent Distribution	n of Residents'	Condit	ions, Services, a	nd Activities as of 12/	31/05
Deaths During Reporting Period				Total			
Percent Admissions from:		Activities of	%		% Needing sistance of	% Totally	Number of
Private Home/No Home Health	27.8	Daily Living (ADL)	Independent	One	or Two Staff	Dependent	Residents
Private Home/With Home Health	5.6	Bathing	0.0		69.4	30.6	36
Other Nursing Homes	22.2	Dressing	0.0		86.1	13.9	36
Acute Care Hospitals	16.7	Transferring	16.7		72.2	11.1	36
Psych. HospMR/DD Facilities	0.0	Toilet Use	5.6		77.8	16.7	36
Rehabilitation Hospitals	22.2	Eating	41.7		50.0	8.3	36
Other Locations	0.0	******	******	*****	*****	******	*****
Total Number of Admissions	18	Continence		%	Special Treatmen	nts	%
Percent Discharges To:		Indwelling Or Extern	nal Catheter	2.8	Receiving Res	oiratory Care	8.3
Private Home/No Home Health	11.8			58.3	Receiving Tra	cheostomy Care	0.0
Private Home/With Home Health	17.6	Occ/Freq. Incontiner	nt of Bowel	19.4	Receiving Suc	tioning	2.8
Other Nursing Homes	23.5	Ī			Receiving Ost	omy Care	0.0
Acute Care Hospitals	5.9	Mobility			Receiving Tub	e Feeding	2.8
Psych. HospMR/DD Facilities	0.0	Physically Restraine	ed	0.0	Receiving Mec	nanically Altered Diets	33.3
Rehabilitation Hospitals	0.0	į -				-	
Other Locations	0.0	Skin Care			Other Resident (Characteristics	
Deaths	35.3	With Pressure Sores		2.8	Have Advance	Directives	91.7
Total Number of Discharges		With Rashes		2.8	Medications		
(Including Deaths)	17	İ			Receiving Psy	choactive Drugs	61.1

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Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

***************	******	****	*****	*****	*****	*****	*****	*****	*****
		Owne	ership:	Bed	Size:	Lic	ensure:		
	This	This Government		Und	er 50	Ski	lled	Al	1
	Facility	Peer	Group	Peer	Group	Peer Group		Faci	lities
	%	% Ratio % Ratio %		%	Ratio	%	Ratio		
Output Debut Desire Debut Green (Times of Debu	07. 2	00 7	1 00	00.7	1 00	06.0	1 12	00.1	1 10
Occupancy Rate: Average Daily Census/Licensed Beds	97.3	90.7	1.07	89.7	1.08	86.0	1.13	88.1	1.10
Current Residents from In-County	86.1	76.4	1.13	66.2	1.30	74.9	1.15	77.6	1.11
Admissions from In-County, Still Residing	50.0	21.5	2.32	26.8	1.87	19.6	2.55	18.1	2.76
Admissions/Average Daily Census	50.0	123.0	0.41	98.1	0.51	139.3	0.36	162.3	0.31
Discharges/Average Daily Census	47.2	122.0	0.39	98.1	0.48	139.6	0.34	165.1	0.29
Discharges To Private Residence/Average Daily Census	13.9	57.8	0.24	25.6	0.54	64.3	0.22	74.8	0.19
Residents Receiving Skilled Care	91.7	96.0	0.95	85.3	1.07	96.4	0.95	92.1	1.00
Residents Aged 65 and Older	94.4	87.5	1.08	92.3	1.02	92.9	1.02	88.4	1.07
Title 19 (Medicaid) Funded Residents	77.8	67.2	1.16	70.6	1.10	69.8	1.11	65.3	1.19
Private Pay Funded Residents	22.2	18.9	1.17	18.8	1.19	19.0	1.17	20.2	1.10
Developmentally Disabled Residents	0.0	0.8	0.00	0.7	0.00	0.7	0.00	5.0	0.00
Mentally Ill Residents	52.8	43.7	1.21	56.6	0.93	34.7	1.52	32.9	1.60
General Medical Service Residents	36.1	18.0	2.01	13.6	2.65	21.9	1.65	22.8	1.59
Impaired ADL (Mean)	52.2	48.7	1.07	50.4	1.04	47.4	1.10	49.2	1.06
Psychological Problems	61.1	66.1	0.92	68.0	0.90	59.0	1.04	58.5	1.05
Nursing Care Required (Mean)	6.6	7.8	0.85	6.2	1.06	7.2	0.92	7.4	0.89